



AUSTIN POLICE DEPARTMENT

ATTN: SPECIAL EVENTS UNIT

P.O. Box 689001

Austin, TX 78768-9001

PHONE – (512)974-5032 / FAX 512-974-6636

Email: APDSpecialEvents@austintexas.gov

SPECIAL EVENT / PARADE PERMIT

The undersigned hereby makes application for a Special Event/Parade Permit to conduct a Special Event in the City of Austin which includes events on the streets and/or other mass gatherings. In support of such application, the applicant makes the following statement and representation.

This **AGREEMENT** is made between the City of Austin, through its Police Department (APD), and the Organization and contact, (**PROMOTER OR HIS/HER/REPRESENTATIVE**) for the use of police officers and vehicles, for an event or parade on the following terms and conditions. The **PROMOTER OR HIS/HER REPRESENTATIVE** agrees to pay all fees associated with this agreement. This agreement is effective upon execution by all parties and remains in effect until the obligations under this Agreement have been performed.

Additionally, the **PROMOTER OR HIS/HER REPRESENTATIVE AGREES:**

1. To secure such permits and approvals as may be necessary to hold/stage the event/parade in the manner anticipated. Approval is specifically conditioned on the promoter/representative securing and complying with all applicable permits.
2. To pay the fees as stated in the City of Austin's 2011-12 Fee Schedule in accordance with City Ordinance 14-8.
****Political Parades or parades organized solely to express the participants' right of free speech are exempt from the APPLICATION FEE but, remain liable for any costs incurred for city services (i.e. event security/escorts/road closures).** (City Code Section 14-8-11, 14-8-12).**
4. The **PROMOTER OR HIS/HER REPRESENTATIVE** understands that the Austin City Council is the only entity that has the authority to authorize fees be waived. **NO MEMBER** of the Austin Police Department is authorized to waive fees, or discount the costs for police services. If **PROMOTER OR HIS/HER REPRESENTATIVE** fails to successfully obtain fee waivers from City Council, they will still be held liable for any/all expenses incurred for the event.
5. Comply with all laws of the United States, and of the State of Texas, all ordinances of the City of Austin, and all rules and requirements of the Police and Fire Departments, or other Municipal Authorities of the City of Austin.
6. Not to assign or transfer its rights under this Agreement without the express written consent of the City of Austin or the APD.
7. That regardless of the actual drafter of this Agreement, this Agreement shall, in the event of any dispute over its meaning or application, be interpreted fairly and reasonably, and neither more strongly for or against any party.
8. That this Agreement is made and shall be construed and interpreted under the laws of the State of Texas and venue for any lawsuit concerning this Agreement shall lie in Travis County, Texas.
9. To the extent any provision in this Agreement is judicially declared invalid, it shall be severable and the remaining parts shall remain in full effect.
10. No recourse shall be had against any elected official officer, employee or agent of the City for any claim based upon this Agreement.
11. The **PROMOTER** warrants that the person executing this agreement is and has been fully authorized to bind the **PROMOTER** and that the representative is familiar with and will abide by the policies governing this agreement. Any violations of policies governing this agreement may place **PROMOTER** on record as ineligible for future agreements.

By my signature below I represent that I have reviewed all policies and procedures with the APD Special Events Unit. I agree to follow them. I understand my responsibility in following these policies and procedures.

PROMOTER/REPRESENTATIVE: _____

Signature

Print Name

Executed this the _____ day of _____, 20____.

Organization: _____ **E-mail Address:** _____

Mailing Address: _____ **City:** _____ **St:** _____ **Zip:** _____

Phone: **Day:** _____ **Evening:** _____ **Cell:** _____ **Fax:** _____

BILLING INFORMATION

ORGANIZATION: _____

POINT OF CONTACT NAME: _____

BILLING ADDRESS: _____

BUSINESS PHONE NUMBER: _____ FAX NUMBER: _____

CELL NUMBER: _____

EMAIL ADDRESS: _____

EVENT INFORMATION

NAME OF EVENT: _____

DATE(S) OF EVENT: _____

TIME OF THE EVENT: START _____ END _____

TYPE OF EVENT: (Check all that apply): ☐ Moving Event ☐ Stationary ☐ Walking Event
☐ Parade ☐ Run ☐ Walk ☐ Security Assignment

ASSEMBLY TIME FOR PARTICIPANTS: _____ ☐ AM / ☐ PM

START TIME FOR THE EVENT: _____ ☐ AM / ☐ PM

STARTING LOCATION FOR THE EVENT: _____

ENDING TIME LOCATION FOR THE EVENT: _____

ESTIMATED DURATION FOR THE EVENT: _____

NAME AND PHONE NUMBER OF ONSITE POINT OF CONTACT: _____

PROPOSED ROUTE OF THE EVENT: _____

ESTIMATED NUMBER OF PEDESTRIANS: _____

ESTIMATED NUMBER OF FLOATS: _____

ESTIMATED NUMBER OF ANIMALS: _____

NUMBER OF OFFICERS YOU ARE REQUESTING _____

Street Closures Requested: ☐ Full Street Closure ☐ Partial Street Closure ☐ Bubble

**** Road closure permits are also required from the City of Austin's Right-of-Way Management Office ****

State in detail the objective of the proposed event:

IS THIS EVENT POLITICAL IN NATURE?

☐ YES / ☐ NO

If yes, provide documentation/explain nature of political status:

****NOTE** Political Parades or parade organized solely to express the participants' right of free speech are exempt from the APPLICATION FEE but remain liable for any for costs incurred for city services (i.e. event security/escorts).** (City Code Section 14-8-11, 14-8-12).**

Do you have a barricade company for this event?

☐ YES / ☐ NO

If yes, what is the name of the barricade company? _____

Who will be your primary point of contact for the barricade company on the day of your event?

NAME: _____ Mobile Number: _____

Have you contacted the City of Austin Right of Way office? ☐ YES / ☐ NO

If yes, who have you been working with on your event? _____

Will APD Special Events coordinate the police officers for this event? ☐ YES / ☐ NO

Will other off-duty police officers be used for this event? ☐ YES / ☐ NO

If yes, what law enforcement agency are they employed by?

☐ Austin Police Department (under a Secondary Employment Contract)

☐ Other Law Enforcement Agency:

What is the name and contact information for the off-duty police officers coordinating the officers for this production? (Leave blank if APD Special Events)

Name: _____

Phone: _____

Will a private security agency be used for this event? ☐ YES / ☐ NO

If yes, what agency are they employed by?

Number of security agents to be hired for the event

Will the event be on:

☐ Congress Avenue Bridge

☐ Congress Avenue

☐ South 1st Street Bridge

☐ 5th or 6th Street

☐ 11th Street

☐ Cesar Chavez Street (Mopac to IH-35)

☐ Guadalupe St and Lavaca Street

☐ Lamar Blvd between West 38th Street and Ben White

Will the event encircle a Geographic Area?

☐ YES / ☐ NO

Will the event be on a Monday – Friday (other than on a Legal Holiday)? ☐ YES / ☐ NO

Will alcohol be served during the event? ☐ YES / ☐ NO

*I certify the information in this application is accurate and the event described with this permit will follow all laws and ordinances of the State of Texas and City of Austin. I further understand that each section of this application **must** be completed or it will not be accepted.*

(Signature of Applicant Requesting Permit is Required)

APD SPECIAL EVENTS UNIT USE ONLY

Date Received by the APD Special Events Unit: _____

Reviewed by: _____